

Henderson County USE ONLY		
Date Received	Fee Paid	Permit Number
Applicable Rules: <input type="checkbox"/> Ph II - Post Construction (select all that apply) <input type="checkbox"/> Non-Coastal SW- HQW/ORW Waters		



## Fletcher, North Carolina

### STORMWATER MANAGEMENT PERMIT APPLICATION FORM

*This form may be photocopied for use as an original*

#### I. GENERAL INFORMATION

1. Project Name (subdivision, facility, or establishment name - should be consistent with project name on plans, specifications, letters, operation and maintenance agreements, etc.):  
\_\_\_\_\_

2. Location of Project (street address):  
\_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

3. Directions to project (from nearest major intersection):  
\_\_\_\_\_  
\_\_\_\_\_

4. Latitude: \_\_\_\_\_ ° \_\_\_\_\_ ' \_\_\_\_\_ " N Longitude: \_\_\_\_\_ ° \_\_\_\_\_ ' \_\_\_\_\_ " W of the main entrance to the project.

#### II. PERMIT INFORMATION:

1. a. Specify whether project is (check one):  New  Modification  Renewal w/ Modification†  
H †Renewals with modifications also requires HC-102 - Renewal Application Form

b. If this application is being submitted as the result of a **modification** to an existing permit, list the existing permit number \_\_\_\_\_, its issue date (if known) \_\_\_\_\_, and the status of construction:  Not Started  Partially Completed\*  Completed\* *\*provide a designer's certification*

2. Specify the type of project (check one):

Low Density  High Density  Drains to an Offsite Stormwater System  Other

3. If this application is being submitted as the result of a **previously returned application** or a **letter from Henderson County requesting a HC stormwater management permit application**, list the stormwater project number, if assigned, \_\_\_\_\_ and the previous name of the project, if different than currently proposed, \_\_\_\_\_.

4. a. Additional Project Requirements (check applicable blanks):

CAMA Major  Sedimentation/Erosion Control: \_\_\_\_\_ ac of Disturbed Area  
 NPDES Industrial Stormwater  404/401 Permit: Proposed Impacts \_\_\_\_\_

b. If any of these permits have already been acquired please provide the Project Name, Project/Permit Number, issue date and the type of each permit: \_\_\_\_\_

5. Is the project located within 5 miles of a public airport?  No  Yes  
*If yes, see S.L. 2012-200, Part VI*

**III. CONTACT INFORMATION**

1. a. Print Applicant / Signing Official's name and title (specifically the developer, property owner, lessee, designated government official, individual, etc. who owns the project):

Applicant/Organization: \_\_\_\_\_

Signing Official & Title: \_\_\_\_\_

b. Contact information for person listed in item 1a above:

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if applicable): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

c. Please check the appropriate box. The applicant listed above is:

- The property owner (Skip to Contact Information, item 3a)
- Lessee\* (Attach a copy of the lease agreement and complete Contact Information, item 2a and 2b below)
- Purchaser\* (Attach a copy of the pending sales agreement and complete Contact Information, item 2a and 2b below)
- Developer\* (Complete Contact Information, item 2a and 2b below.)

2. a. Print Property Owner's name and title below, if you are the lessee, purchaser or developer. (This is the person who owns the property that the project is located on):

Property Owner/Organization: \_\_\_\_\_

Signing Official & Title: \_\_\_\_\_

b. Contact information for person listed in item 2a above:

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if applicable): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

3. a. (Optional) Print the name and title of another contact such as the project's construction supervisor or other person who can answer questions about the project:

Other Contact Person/Organization: \_\_\_\_\_

Signing Official & Title: \_\_\_\_\_

b. Contact information for person listed in item 3a above:

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

4. Local jurisdiction for building permits: Henderson County Permits and Inspections

Point of Contact: Crystal Lyda Phone #: (828 ) 694-6510

**IV. PROJECT INFORMATION**

1. In the space provided below, briefly summarize how the stormwater runoff will be treated.

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2. a. **If claiming vested rights**, identify the supporting documents provided and the date they were approved:

<input type="checkbox"/> Approval of a Site Specific Development Plan or PUD	Approval Date: _____
<input type="checkbox"/> Valid Building Permit	Issued Date: _____
<input type="checkbox"/> Other: _____	Date: _____

b. **If claiming vested rights**, identify the regulation(s) the project has been designed in accordance with:

Coastal SW - 1995       Ph II - Post Construction

3. Stormwater runoff from this project drains to the \_\_ French Broad or \_\_Broad River -River basin.

4. Total Property Area: \_\_\_\_\_ acres      5. Total Coastal Wetlands Area: N/A acres  
 6. Total Surface Water Area: \_\_\_\_\_ acres

7. Total Property Area (4) - Total Coastal Wetlands Area (5) - Total Surface Water Area (6) = Total Project Area\*: \_\_\_\_\_ acres

\* Total project area shall be calculated to exclude the following: the normal pool of impounded structures, the area between the banks of streams and rivers, the area below the Normal High Water (NHW) line or Mean High Water (MHW) line, and coastal wetlands landward from the NHW (or MHW) line. The resultant project area is used to calculate overall percent built upon area (BUA). Non-coastal wetlands landward of the NHW (or MHW) line may be included in the total project area.

8. Project percent of impervious area: (Total Impervious Area / Total Project Area) X 100 = \_\_\_\_\_%

9. How many drainage areas does the project have? \_\_\_\_ (For high density, count 1 for each proposed engineered stormwater BMP. For low density and other projects, use 1 for the whole property area)

10. Complete the following information for each drainage area identified in Project Information item 9. If there are more than four drainage areas in the project, attach an additional sheet with the information for each area provided in the same format as below.

Basin Information	Drainage Area __	Drainage Area __	Drainage Area __	Drainage Area __
Receiving Stream Name				
Stream Class *				
Stream Index Number *				
Total Drainage Area (sf)				
On-site Drainage Area (sf)				
Off-site Drainage Area (sf)				
Proposed Impervious Area ** (sf)				
% Impervious Area ** (total)				

Impervious** Surface Area	Drainage Area __	Drainage Area __	Drainage Area __	Drainage Area __
On-site Buildings/Lots (sf)				
On-site Streets (sf)				
On-site Parking (sf)				
On-site Sidewalks (sf)				
Other on-site (sf)				
Future (sf)				
Off-site (sf)				
Existing BUA*** (sf)				
Total (sf):				

\* Stream Class and Index Number can be determined at: <http://portal.ncdenr.org/web/wq/ps/csu/classifications>

\*\* Impervious area is defined as the built upon area including, but not limited to, buildings, roads, parking areas, sidewalks, gravel are a(not landscape areas), etc.

\*\*\* Report only that amount of existing BUA that will remain after development. Do not report any existing BUA that is to be removed and which will be replaced by new BUA.

11. How was the off-site impervious area listed above determined? Provide documentation. \_\_\_\_\_

## V. SUPPLEMENT AND O&M FORMS

The applicable state stormwater management permit supplement and operation and maintenance (O&M) forms must be submitted for each BMP specified for this project.

## VI. SUBMITTAL REQUIREMENTS

Only complete application packages will be accepted and reviewed by the Henderson County Water Resources Department on behalf of the Town of Fletcher. A complete package includes all of the items listed below. **A detailed application instruction sheet is available at <https://www.hendersoncountync.gov/waterresources/page/post-construction-stormwater-management-0>.** The complete application package should be submitted to Henderson County Division of Water Resources.

Please **indicate that the following required information have been provided by initialing** in the space provided for each item. **All original documents MUST be signed and initialed in blue ink.** Initials

1. Original and one copy of the Stormwater Management Permit Application Form. \_\_\_\_\_
2. Original and one copy of the signed and notarized Deed Restrictions & Protective Covenants Form. \_\_\_\_\_  
(if required as per Part VII below)
3. Original of the applicable Supplement Form(s) (sealed, signed and dated) **and** O&M agreement(s) for each BMP. \_\_\_\_\_
4. Permit application processing fee of \_\_\_\_\_ make check payable to *Henderson County*. \_\_\_\_\_  
**See Fee Schedule located at <https://www.hendersoncountync.gov/waterresources/page/approved-fees-fy-2018-2019-6>.**
5. A detailed narrative (one to two pages) describing the stormwater treatment/management for the \_\_\_\_\_ project. This is required in addition to the brief summary provided in the Project Information, item 1.
6. A USGS map identifying the site location. If the receiving stream is reported as class SA or the receiving stream drains to class SA waters within ½ mile of the site boundary, include the ½ mile radius on the map. \_\_\_\_\_
7. Sealed, signed and dated calculations (one copy). \_\_\_\_\_
8. Two sets of plans folded to 8.5" x 14" (sealed, signed, & dated), including: \_\_\_\_\_
  - a. Development/Project name.
  - b. Engineer and firm.
  - c. Location map with named streets and NCSR numbers.
  - d. Legend.
  - e. North arrow.
  - f. Scale.
  - g. Revision number and dates.
  - h. Identify all surface waters on the plans by delineating the normal pool elevation of impounded structures, the banks of streams and rivers, the MHW or NHW line of tidal waters, and any coastal wetlands landward of the MHW or NHW lines.
    - Delineate the vegetated buffer landward from the normal pool elevation of impounded structures, the banks of streams or rivers, and the MHW (or NHW) of tidal waters.
  - i. Dimensioned property/project boundary with bearings & distances.
  - j. Site Layout with all BUA identified and dimensioned.
  - k. Existing contours, proposed contours, spot elevations, finished floor elevations.
  - l. Details of roads, drainage features, collection systems, and stormwater control measures.
  - m. Wetlands delineated, or a note on the plans that none exist. (Must be delineated by a qualified person. Provide documentation of qualifications and identify the person who made the determination on the plans.
  - n. Existing drainage (including off-site), drainage easements, pipe sizes, runoff calculations.
  - o. Drainage areas delineated (included in the main set of plans, not as a separate document).
  - p. Vegetated buffers (where required).
9. Copy of any applicable soils report with the associated SHWT elevations (Please identify elevations in addition to depths) as well as a map of the boring locations with the existing elevations and boring logs. Include an 8.5"x11" copy of the NRCS County Soils map with the project area clearly delineated. For projects with infiltration BMPs, the report should also include the soil type, expected infiltration rate, and the method of determining the infiltration rate. \_\_\_\_\_

10. A copy of the most current property deed. Deed book: \_\_\_\_\_ Page No: \_\_\_\_\_
11. For corporations and limited liability corporations (LLC): Provide documentation from the NC \_\_\_\_\_  
**Secretary of State or other official documentation, which supports the titles and positions held by the persons listed in Contact Information, item 1a, 2a, and/or 3a per 15A NCAC 2H.1003(e). The corporation or LLC must be listed as an active corporation in good standing with the NC Secretary of State, otherwise the application will be returned.** <http://www.sosnc.gov/corporations/>

**VII. DEED RESTRICTIONS AND PROTECTIVE COVENANTS**

For all subdivisions, outparcels, and future development, the appropriate property restrictions and protective covenants are required to be recorded prior to the sale of any lot. If lot sizes vary significantly or the proposed BUA allocations vary, a table listing each lot number, lot size, and the allowable built-upon area must be provided as an attachment to the completed and notarized deed restriction form.

In the instances where the applicant is different than the property owner, it is the responsibility of the property owner to sign the deed restrictions and protective covenants form while the applicant is responsible for ensuring that the deed restrictions are recorded.

**By the notarized signature(s) below, the permit holder(s) certify that the recorded property restrictions and protective covenants for this project, if required, shall include all the items required in the permit and listed on the forms available on the website, that the covenants will be binding on all parties and persons claiming under them, that they will run with the land, that the required covenants cannot be changed or deleted without concurrence from the Henderson County, and that they will be recorded prior to the sale of any lot.**

**VIII. CONSULTANT INFORMATION AND AUTHORIZATION**

Applicant: Complete this section if you wish to designate authority to another individual and/or firm (such as a consulting engineer and/or firm) so that they may provide information on your behalf for this project (such as addressing requests for additional information).

Consulting Engineer: \_\_\_\_\_

Consulting Firm: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

**IX. PROPERTY OWNER AUTHORIZATION** (if Contact Information, item 2 has been filled out, complete this section)

I, (print or type name of person listed in Contact Information, item 2a) \_\_\_\_\_, certify that I own the property identified in this permit application, and thus give permission to (print or type name of person listed in Contact Information, item 1a) \_\_\_\_\_ with (print or type name of organization listed in Contact Information, item 1a) \_\_\_\_\_ to develop the project as currently proposed. A copy of the lease agreement or pending property sales contract has been provided with the submittal, which indicates the party responsible for the operation and maintenance of the stormwater system.

As the legal property owner, I acknowledge, understand, and agree by my signature below, that if my designated agent (entity listed in Contact Information, item 1) dissolves their company and/or cancels or defaults on their lease agreement, or pending sale, responsibility for compliance with the Henderson County Stormwater permit reverts back to me, the property owner. As the property owner, it is my responsibility to notify Henderson County Water Resources Department immediately and submit a completed Name/Ownership Change Form within 30 days; otherwise I will be operating a stormwater treatment facility without a valid permit. I understand that the operation of a stormwater treatment facility without a valid permit is a violation of NC General Statute 143-215.1 and may result in appropriate enforcement action including the assessment of civil penalties of up to \$25,000 per day, pursuant to NCGS 143-215.6.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public for the State of \_\_\_\_\_, County of \_\_\_\_\_, do hereby certify that \_\_\_\_\_ personally appeared before me this \_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, and acknowledge the due execution of the application for a stormwater permit. Witness my hand and official seal, \_\_\_\_\_



SEAL

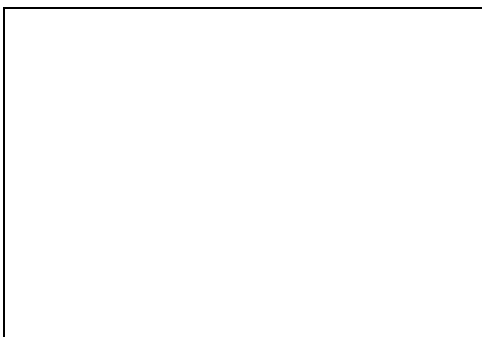
My commission expires \_\_\_\_\_

**X. APPLICANT'S CERTIFICATION**

I, (print or type name of person listed in Contact Information, item 1a) \_\_\_\_\_, certify that the information included on this permit application form is, to the best of my knowledge, correct and that the project will be constructed in conformance with the approved plans, that the required deed restrictions and protective covenants will be recorded, and that the proposed project complies with the requirements of the applicable stormwater rules under 15A NCAC 2H .1000 and any other applicable state stormwater requirements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public for the State of \_\_\_\_\_, County of \_\_\_\_\_, do hereby certify that \_\_\_\_\_ personally appeared before me this \_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, and acknowledge the due execution of the application for a stormwater permit. Witness my hand and official seal, \_\_\_\_\_



SEAL

My commission expires \_\_\_\_\_